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Bib Data Sheet

CONFIRMATION NO. 3151

SERIAL NUMBER 10/796,662	FILING DATE 03/08/2004 RULE	CLASS 442	GROUP ART UNIT 1771	ATTORNEY DOCKET NO. 122/21
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 08/23/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no Allowance Examiner's Signature Initials	STATE OR COUNTRY VA	SHEETS DRAWING 6	TOTAL CLAIMS 28 10	INDEPENDENT CLAIMS 8 2
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TITLE

Hard armor composite

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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